## SI

## Secure Care STUDENT INTERVIEW FORM

PEA	MONITOR	
INTER	RVIEW WITH CENSUS/STUDENT #	
DATE_		
		For ESS Use Only
1.	What do you like about your school? What do you do outside of school?	
2.	What is the hardest / most challenging for you in school? Outside of school?	
3.	Were you invited to your last IEP meeting?  YESNO	III.A.5.a
• •	Did you attend your last IEP meeting?  YESNO  yes, please describe:  Did you know what was going to take place at the meeting beforehand? How?  What types of questions were you asked? What information did you share?  What is in your IEP— accommodations, courses, a plan and goals for what you will do after leaving high school, etc.  no, please describe:  How did you let the IEP Team know what you want to do after high school?	
•	Is that written into your IEP?	I U U U

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5.	Will you need help preparing for what you want to do after high school?  Who do you think will provide you with this help?  What types of things are they doing/planning to do?	I
		O U III.A.5.d
6.	Of all the classes you have taken, which one was the best? Why?	,
	What classes would you like to take? Who chose the classes you are taking? <b>Do</b>	
	you think these classes will help you with what you want to do after high school?	O I I
		III.A.5.e
7.	If you are 17 or older, were you told that at age 18 your rights would transfer from your parents to yourself  YES  NO	
	If YES, what does this mean to you?	I I
		III.A.5.f